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## **TRANSMITTAL FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	09/905,482	
Filing Date	July 13, 2001	
First Named Inventor	Baldwin	
Art Unit	1754	
Examiner Name	Langel	
Attorney Docket Number	47354/261132	

ENCLOSURES (check all that apply)							
Fee Transmittal F	orm	☐ Drawing(s)	After Allowance Communication to Technology Center (TC)				
Fee Attached		Licensing-related Papers	Appeal Communication to Board of Appeals and Interferences				
Amendment / Reply		Petition	Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)				
After Final		Petition to Convert to a Provisional Application	Proprietary Information				
Affidavits/declaration(s)		Power of Attorney, Revocation Change of Correspondence Address	Status Letter				
		Terminal Disclaimer	Other Enclosure(s) (please identify below):				
Express Abandonment Request		Request for Refund	-Return Receipt Postcard				
		CD, Number of CD(s)					
Information Disclo	sure Statement						
Certified Copy of Priority Document(s)		Remarks					
Response to Missing Parts/ Incomplete Application							
Response to Missing Parts under 37 CFR 1.52 or 1.53							
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT							
Firm or Individual name	Bruce D. Gray, Reg. No. 35,799 Kilpatrick Stockton LLP						
Signature	M						
Date	September 20, 2004						

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

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Complete if Known **FEE TRANSMITTAL** Application Number 09/905,482 for FY 2004 Filing Date July 13, 2001 P First Named Inventor Baldwin Effective 10/01/2003. Patent fees are subject to annual revision. **Examiner Name** Langel plicant claims small entity status. See 37 CFR 1.27 Art Unit 1754

TOTAL AMOUN	I OF PAYMENT (\$) 64	.0	Attorne	y Doc	cket No.	11.00			
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)							
		3. AD	DITIO	ONAL FE	ES				
☐ Check ☐ Credit card ☐ Money ☐ Other ☐ None Order		Large	Entity	Small E	ntity				
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⊠ Charge fee(s) indicated below ☐ Credit any overpayments     ☐ Charge any additional fee(s) during the pendency of this application		1805	1,840	1805	1,840*		ication of SIR after		
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**or number previously paid, if greater; For Reissues, see above				ou by		,		(4) 41	
SUBMITTED BY		- Basistration No.		_		1	Com	plete (if applicable)	
Name (Print/Type)	Bruce D. Gray	Registration No. (Attorney/Agent)		3	35,799		Telephone	404.815.6500	

September 20, 2004 Date Signature

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